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CONFIRMATION NO. 9991

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| SERIAL NUMBER 09/747,521 | FILING OR 371(c) DATE 12/21/2000 RULE | CLASS 424 | GROUP ART UNIT 1645 | ATTORNEY DOCKET NO. 22727/04079 |
| APPLICANTS Darrel R. Galloway, Dublin, OH; Alfred J. Mateczun, Albuquerque, NM; | | | | |
| ** CONTINUING DATA ***** This appln claims benefit of 60/171,459 12/22/1999 | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 03/05/2001 | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged | | STATE OR COUNTRY OH | SHEETS DRAWING 8 | TOTAL CLAIMS 30 |
| Examiner's Signature _____ Initials _____ | | INDEPENDENT CLAIMS 5 | | |
| ADDRESS 22245 | | | | |
| TITLE METHODS FOR PROTECTION AGAINST LETHAL INFECTION WITH BACILLUS ANTHRACIS | | | | |
| FILING FEE RECEIVED 2220 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |